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Bib Data Sheet

CONFIRMATION NO. 8170

<b>SERIAL NUMBER</b> 09/928,673	<b>FILING DATE</b> 08/13/2001 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2644	<b>ATTORNEY DOCKET NO.</b> 328 P 598	
<b>APPLICANTS</b> Thomas E. Miller, Arlington Heights, IL;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/225,124 08/14/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/18/2001.</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>[Signature]</u> Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 40	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> Peter M Klobuchar Wallenstein & Wagner, Ltd. 53rd Floor 311 South Wacker Drive Chicago, IL 60606-6622					
<b>TITLE</b> Low capacitance receiver coil					
<b>FILING FEE RECEIVED</b> 1390	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		